1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Adair Co	ounty		☐ State
	Street Address 1204 Gre	eensburg Street		□ Federal
	City, State Zip Columbia	a, KY 42728		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W M -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	H/I	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	1	Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001837 Cycles 9 & 10		Electronic Submission
	INO TRUMBE	1 0142 1400001007 Oyolo3 3 d. 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		11	paonago
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		2 2
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Rec	ipient:	7	Fund Type:
	Agency Name Ballard C	ounty		☐ State
	Street Address 3465 Pag	ducah Road		□ Federal
	City, State Zip Barlow, k	(Y 42024		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W 100 -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001838 Cycle 10		Electronic Submission
	Wertramber	1 3142 140000 1000 Sydie 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department		
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAR	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - September			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Mer			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		vill be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	•		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ripient:	7	Fund Type:
	Agency Name Barren C	County		☐ State
	Street Address 202 W V	/ashington Street		
	City, State Zip Glasgow	, KY 42141-2416		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DVC	1111	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	4//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001839 Cycles 8, 9 & 10		☐ Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		2001, Title IV, Part B, Education Department		
		ulations 34 CFR 76,77,80,82 and 85		\
5		504 \$787,500; MUNIS 5504C \$75,000	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CHCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe		-	
40	Compositio/Doutmondin Mo	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		\	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabinet.	<u>, </u>		
14	Authorized By (Name/Title	e): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: September 25, 2014
1		13		

1	Name and Address of Rec	ipient:	7	Fund Type:
	Agency Name Berea In	dependent		☐ State
	Street Address 3 Pirate	Pkwy.		□ Federal
	City, State Zip Berea, K	Y 40403		Other:
			8	Method of Payment:
2	KDE Contact Information:	1011	W	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001840 Cycle 9		Electronic Submission
	Wertramber	1 SNZ 1400001040 Gydlc 3		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	1	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· · · · · · · · · · · · · · · · · · ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Bourbon County		☐ State
	Street Address 3343 Lexington Road		
	City, State Zip Paris, KY 40361		☐ Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT	44/	Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21 st Century Community Learning Centers	1	Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2 1400001841 Cycle 8 & 10		Electronic Submission
			Other Submission of quarterly reimbursement
		4	package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department	1	
	General Administrative Regulations 34 CFR 76,77,80,82 and 85		>
5	Award Amount: MUNIS 5504 \$75,000; MUNIS 5504C \$75,000; MUNIS	11	Evaluations: Submission of an annual report to
	5504X \$75,000	- FAI	Kentucky Department of Education is required
	(See MOA for Budget breakdown)		5 5
6	Period of Award:	Minus.	
	August 1, 2014 - September 30, 2015 KENTUCKY DEPARTMENT	OF E	DUCATION
	August 1, 2014 Soptember 30, 2013 Remove Deramment	01 =	DOCATION
12	Consortia/Partnership Members:	.	
13	Special Instructions/Conditions: Grants (New, Continuation, Expans	síon) a	warded for five years/projects of funding, as stated
	in the Request for Application, based upon availability of funds fro		
	and award notifications will be prepared based upon the timeframe		
	Cabínet.		yy v
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
	Division of Consolidated Plans & Audits		
L			

Agency Name Boyd County Street Address 1104 Bob McCullough Dr. City, State Zip Ashland, KY 41102 KDE Contact Information: Program Consultant Street Address 500 Mero St., 19th Fl. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Bescription/Fund Source of Award and Fiscal Year: Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001842 Cycle 8 Carant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 State Federal Cother: Cherry Gedral Cash Request Expenditure Reimbursement	1	Name and Address of Recipient:	7	Fund Type:
City, State Zip Ashland, KY 41102 City, State Zip Ashland, KY 41102		Agency Name Boyd County		State
Street Address Source S		Street Address 1104 Bob McCullough Dr.		
Received Frequency		City, State Zip Ashland, KY 41102		Other:
Received Frequency				
Program Consultant Street Address Receipt of Invoice from Vendor Receipt of Invoice from Vendor Monthly Quarterly Other Street Address Str			8	Method of Payment:
Street Address	2	KDE Contact Information:	CIII.	Federal Cash Request
Budget Contact Street Address Stree		Program Consultant Brigette Stacy 502-564-1473 ext. 4072	CHI	Expenditure Reimbursement
Street Address City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description Pund Source No Child Left Behind Act, Title IV, Part B MOA Number PON2 1400001842 Cycle 8 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 6 Period of Award: Receipt of Invoice from Vendor		Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001842 Cycle 8 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 6 Period of Award: PReimbursement Frequency: Monthly Quarterly Quarterly Pinancial Reporting Method: Electronic Submission Other Submission of quarterly reimburseme package 10 Financial Reporting Method: Electronic Submission of quarterly reimburseme package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required		Budget Contact Martha Johnson 502-564-1979 ext. 43	8	Lump Sum
3 Description/Fund Source of Award and Fiscal Year: Description D		Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description D		City, KY Zip Frankfort, Kentucky 40601	J -	
Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001842 Cycle 8 PON2 1400001842 Cycle 8 PON2 1400001842 Cycle 8 Pond Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 To determine the control of the contr			9	Reimbursement Frequency:
Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001842 Cycle 8 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 6 Period of Award: Quarterly Other Financial Reporting Method: Electronic Submission Other Submission of quarterly reimburseme package 10 Financial Reporting Method: Electronic Submission of quarterly reimburseme package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required	3	Description/Fund Source of Award and Fiscal Year:		
Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001842 Cycle 8 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 6 Period of Award: Other Financial Reporting Method: □ Electronic Submission ○ Other Submission of quarterly reimburseme package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required			ers	
CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001842 Cycle 8 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504C Amount \$60,000 Gee MOA for Budget breakdown) Financial Reporting Method: □ Electronic Submission of quarterly reimburseme package □ Submission of quarterly reimburseme package □ Submission of an annual report to Kentucky Department of Education is required				
MUNIS Project Number MOA Number See budget on contract MOA Number See budget on contract MOA Number PON2 1400001842 Cycle 8 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504C Amount \$60,000 See MOA for Budget breakdown) Financial Reporting Method: Delectronic Submission Submission of quarterly reimburseme package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required				
MOA Number PON2 1400001842 Cycle 8 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504C Amount \$60,000 See MOA for Budget breakdown) Period of Award: Electronic Submission Other Submission of quarterly reimburseme package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required			10	Financial Reporting Method:
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 (See MOA for Budget breakdown) 6 Period of Award: Other Submission of quarterly reimburseme package Package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required				
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 (See MOA for Budget breakdown) 6 Period of Award: package package Evaluations: Submission of an annual report to Kentucky Department of Education is required		1 5112 1 1555 15 12 5 5 5 5		
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 (See MOA for Budget breakdown) 6 Period of Award: Evaluations: Submission of an annual report to Kentucky Department of Education is required				
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504C Amount \$60,000 (See MOA for Budget breakdown) 6 Period of Award: No Child Left Behind Act of 2001, Title IV, Part B, Education Department Comparison of the comparison	4	Grant Authority (Source):		110000
General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504C Amount \$60,000 (See MOA for Budget breakdown) Period of Award: General Administrative Regulations 34 CFR 76,77,80,82 and 85 Levaluations: Submission of an annual report to Kentucky Department of Education is required			nent	
5 Award Amount: MUNIS 5504C Amount \$60,000 (See MOA for Budget breakdown) 6 Period of Award: See MOA for Budget breakdown 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required			V	
(See MOA for Budget breakdown) 6 Period of Award: Kentucky Department of Education is required	5		11	Evaluations: Submission of an annual report to
6 Period of Award:		PROFICIENT &	REPA	
				CC
August 1, 2014 - September 20, 2015	6			3 3
		August 1, 2014 - September 30, 2015	-	
KENTUCKY DEPARTMENT OF EDUCATION	40		ENT OF I	DUCATION
12 Consortia/Partnership Members:		•		
13 Special Instructions/Conditions: Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated	13			
in the Request for Application, based upon availability of funds from the United States Department of Education. Contract				
and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration			rames allo	wed by the Kentucky Finance & Administration
Cabinet.				
14 Authorized By (Name/Title): Donna Tackett, Director Date: September 25, 2014	14			Date: September 25, 2014
Division of Consolidated Plans & Audits		Division of Consolidated Plans & Au	dits	

1	Name and Address of Reci	pient:	7	Fund Type:
	Agency Name Boys & G	irls Club Inc.		☐ State
	Street Address 1201 Stor	ry Ave., Suite 250		□ Federal
	City, State Zip Louisville,	KY 40206		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	W	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		. Tallinion, Haritasin, 1995.	9	Reimbursement Frequency:
3	Description/Fund Source of	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		☐ Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001890 Cycle 10		Electronic Submission
	IVIO/ (Tallibel	1 3142 1400001030 Sycie 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		lations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 55		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 5, 2014 - September	30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Men			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		vill be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title)	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	•	7	Fund Type:
	Agency Name Boys & 0	Girls Club of Greater Cincinnati		☐ State
	Street Address 600 Dalt	on Avenue		□ Federal
	City, State Zip Cincinna	iti, OH 45203		Other:
			8	Method of Payment:
2	KDE Contact Information:	2011	V III -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7.4	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		Training to the state of the st	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001891 Cycle 8		Electronic Submission
	ING/CIVATIBET	1 0142 1400001031 Cydlc 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		11	paonago
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 15, 2014 - Septemb			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ipient:	7	Fund Type:
	Agency Name Bullitt Co	ounty		☐ State
	Street Address 1040 Hw	y. 44E		□ Federal
	City, State Zip Shepher	dsville, KY 40165		Other:
			8	Method of Payment:
2	KDE Contact Information:		V M	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7.4	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001843 Cycle 10		Electronic Submission
	IVIO7 (TVallise)	1 SNZ 1400001040 Gydlc 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paorago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		2 2
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Campbe	Il County		☐ State
	Street Address 101 Orcl	nard Ln.		□ Federal
	City, State Zip Alexand	ria, KY 41001		Other:
			8	Method of Payment:
2	KDE Contact Information:	1011	W III	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001844 Cycle 10		Electronic Submission
	Wie / Cramber	TOTAL PROGRAMME STATE OF THE ST		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paoriago
		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	$c \cup c \subset c$		C C
6	Period of Award:	3 0 6 6		3 3
	August 20, 2014 - Septemb	The second secon		
40	0 11 /0 1	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, \	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ripient:	7	Fund Type:
	Agency Name Campbe	llsville Ind		☐ State
	Street Address 136 S Co	olumbia		□ Federal
	City, State Zip Campbe	llsville, KY 42718		Other:
			8	Method of Payment:
2	KDE Contact Information:		W III -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001845 Cycle 8		Electronic Submission
	Wertramber	1 3142 1400001040 Gydic 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe	r 30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Carroll C	County		☐ State
	Street Address 813 Haw	kins Street		
	City, State Zip Carrollto	n, KY 41008		Other:
			8	Method of Payment:
2	KDE Contact Information:		VIII -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	-	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001846 Cycle 10		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT OF PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			CC
6	Period of Award:	3 0 6 6		3 3
	August 13, 2014 - Septemb	1 /	-	
40	Consertia/Deutwership Me	KENTUCKY DEPARTMENT	OF L	DUCATION
12	Consortia/Partnership Me		<i>()</i>	and the second s
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	•		Date: September 25, 2014
1		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:		7	Fund	Type:
	Agency Name Casey C				State
	Street Address 1922 N.			\boxtimes	Federal
	City, State Zip Liberty, F	(Y 42539			Other:
			8		od of Payment:
2	KDE Contact Information:	.16K1 U			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072			Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT			Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358			Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT			Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601			
			9	Reimb	oursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:			Monthly
	Description	21 st Century Community Learning Centers		\boxtimes	Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B			Other
	CFDA#	84.287C			
	MUNIS Project Number	See budget on contract	10	Finan	cial Reporting Method:
	MOA Number	PON2 1300000079 Cycle 10			Electronic Submission
				$\overline{\boxtimes}$	Other Submission of quarterly reimbursement
					package
4	Grant Authority (Source):				
	No Child Left Behind Act of	2001, Title IV, Part B, Education Department			
		ulations 34 CFR 76,77,80,82 and 85	-	0.00	FOR
5	Award Amount: MUNIS 5	504C Amount \$75,000	11		ations: Submission of an annual report to
		SIICC		Kentu	cky Department of Education is required
	(See MOA for Budget breakdown)	3 0 6 6	llene.		3
6	Period of Award:	Verener Descent			
	August 1, 2014 - September	30, 2015 KENTUCKY DEPARTMENT	OF E	DUCA	TION
12	Consortia/Partnership Me	mhers:			
13			ím) a	wardon	for five years/projects of funding, as stated
					States Department of Education. Contracts
		will be prepared based upon the timeframe			
	Cabinet.	wa be preparea basea apon the timegrame	s uiwv	veu by	ine Remuky Jumine & Administration
14	Authorized By (Name/Title): Donna Tackett, Director		Date:	September 25, 2014
14	Authorized by (Name/Title	Division of Consolidated Plans & Audits		Date:	September 25, 2014
		Division of Consolidated Plans & Audits			

Agency Name	7 Fund Type:		N	1
City, State Zip Cave City, KY 42127 City, State Zip Cave City, KY 42127 City, State Zip Cave City, KY 42127 Cother:	│ │ │ State	ame Caverna Independent	Α	
Street Address Str	│ │ │ │ │	lress 1102 N. Dixie Hwy. □	S	
Rogram Consultant	Other:	Zip Cave City, KY 42127	C	
Rogram Consultant				
Program Consultant Street Address Street Address Budget Contact Budget Contact Budget Contact Street Address Stoo Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Bescription/Fund Source of Award and Fiscal Year: Description Prinancial Reporting Method: MUNIS Project Number MOA Number PON2 1400001848 Cycle 9 Program Consultant Street Address Street Address Street Address Street Address Street Address Stoo Mero St., 16th Fl. CPT Automatic Payment Lump Sum Receipt of Invoice from Vendor PReimbursement Frequency: Monthly Quarterly Quarterly Other See budget on contract MOA Number PON2 1400001848 Cycle 9 Financial Reporting Method: Belectronic Submission Other Submission of quarterly reimbursement package Financial Reporting Method: Belectronic Submission of quarterly reimbursement package Award Amount: MUNIS 5504 Amount \$112,500 Street Address Submission of an annual report to	8 Method of Payment:	8 Metho		
Street Address Budget Contact Budget Contact Street Address Stoo Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Description/Fund Source of Award and Fiscal Year: Description Pescription Pescription Surce Fund Source CFDA# B4.287C MUNIS Project Number MOA Number See budget on contract MOA Number PON2 1400001848 Cycle 9 Reimbursement Frequency: Monthly Quarterly Other CFDA# Street Address See budget on contract MOA Number PON2 1400001848 Cycle 9 Financial Reporting Method: Description Submission of quarterly reimbursement Description See budget on contract MOA Number PON2 1400001848 Cycle 9 Financial Reporting Method: Description Submission of quarterly reimbursement Description Submission of quarterly reimbursement Description Submission of an annual report to	☐ Federal Cash Request	act Information:	K	2
Budget Contact Street Address Award Amount: Martha Johnson 502-564-1979 ext. 4358 Street Address Street Address Street Address Street Address Receipt of Invoice from Vendor Receipt of Invoice from Vendor Receipt of Invoice from Vendor Receipt of Invoice from Vendor Receipt of Invoice from Vendor Receipt of Invoice from Vendor Receipt of Invoice from Vendor Monthly Quarterly Other Submission Other Submission of quarterly reimbursement package 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 11 Evaluations: Submission of an annual report to	2-564-1473 ext. 4072 Expenditure Reimbursement	Consultant Brigette Stacy 502-564-1473 ext. 4072	Р	
Street Address City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description Fund Source No Child Left Behind Act, Title IV, Part B CFDA# MOA Number 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 Receipt of Invoice from Vendor Road Receipt of Invoice from Vendor Road Reporting Nonthly Road Remounts Receipt of Invoice from Vendor Road Remounts Reporting Nonthly Road Remounts Reporting Nonthly Road Remounts Reporting Nonthly Road Remounts Road Ro	n Fl. CPT ☐ Automatic Payment	lress 500 Mero St., 19th Fl. CPT	S	
City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21 st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001848 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 PReimbursement Frequency: Monthly Quarterly Quarterly Other Crona General Administrative Regulations 34 CFR 76,77,80,82 and 85	502-564-1979 ext. 4358	ontact Martha Johnson 502-564-1979 ext. 4358	В	
3 Description/Fund Source of Award and Fiscal Year: Description D	n FI. CPT Receipt of Invoice from Vendor	lress 500 Mero St., 16th Fl. CPT	S	
3 Description/Fund Source of Award and Fiscal Year: Description D	ку 40601	p Frankfort, Kentucky 40601	C	
3 Description/Fund Source of Award and Fiscal Year: Description				
Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001848 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 Quarterly Other Poher Poher Other Other Poher Poher Other ID Financial Reporting Method: Departing Method: Departing Method: Department Department Submission of quarterly reimbursement Department Submission of an annual report to			D	3
Fund Source CFDA# S4.287C MUNIS Project Number MOA Number General Administrative Regulations 34 CFR 76,77,80,82 and 85 No Child Left Behind Act, Title IV, Part B 84.287C MUNIS Project Number See budget on contract PON2 1400001848 Cycle 9 Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package The policy of the policy of the package The policy of the policy of the package of the package The policy of the package of				
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MUNIS Project Number MOA Number See budget on contract MOA Number PON2 1400001848 Cycle 9 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 MUNIS Project Number See budget on contract PON2 1400001848 Cycle 9 Cother Submission of quarterly reimbursement package 11 Evaluations: Submission of an annual report to		,		
MOA Number PON2 1400001848 Cycle 9 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 MOA Number Electronic Submission Other Submission of quarterly reimbursement package 11 Evaluations: Submission of an annual report to	Intract 10 Financial Reporting Method:		_	
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d Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 11 Evaluations: Submission of an annual report to				
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 11 Evaluations: Submission of an annual report to				
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 11 Evaluations: Submission of an annual report to		hority (Source):	G	4
General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500	B, Education Department			
5 Award Amount: MUNIS 5504 Amount \$112,500 11 Evaluations: Submission of an annual report to				
				5
Nentucky Department of Education is required	Kentucky Department of Education is required			
(See MOA for Budget breakdown)				
6 Period of Award:				6
August 1, 2014 - September 30, 2015			Α	
KENTUCKY DEPARTMENT OF EDUCATION	UCKY DEPARTMENT OF EDUCATION		ļ.,	40
12 Consortia/Partnership Members:		•		
13 Special Instructions/Conditions: Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as state				13
in the Request for Application, based upon availability of funds from the United States Department of Education. Contract				
and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration	ased upon the timeframes allowed by the Kentucky Finance & Administratio	$^{\prime}$ d notifications will be prepared based upon the timeframes allowed by †		
Cabinet.				
14 Authorized By (Name/Title): Donna Tackett, Director Date: September 25, 2014	, , , , , , , , , , , , , , , , , , ,		Α	14
Division of Consolidated Plans & Audits	solidated Plans & Audits	Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Christiar	n County		☐ State
	Street Address 200 Glas	ss St.		□ Federal
	City, State Zip Hopkins	ville, KY 42240		Other:
			8	Method of Payment:
2	KDE Contact Information:	- 0 V C	V M	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001849 Cycle 8		Electronic Submission
	Wie / Cramber	1 3112 1 10000 10 10 Cyclo 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonage
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	$c \cup c \subset c$		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
40	0 11 /0 1	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		· ·	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

Agency Name Street Address 214 W. Main St. City, State Zip Cloverport, KY 40111 Street Address	1	Name and Address of Reci	pient:	7	Fund Type:
City, State Zip Cloverport, KY 40111 City, State Zip Cloverport, KY 40111					☐ State
August 1, 2014 - September 30, 2015 September		Street Address 214 W. M	ain St.		
Rederal Cash Request Federal Cash Request Street Address Soo Mero St., 19th Fl. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Receipt of Invoice from Vendor Receipt of Invoice from Vendor		City, State Zip Cloverpor	t, KY 40111		Other:
Rederal Cash Request Federal Cash Request Street Address Soo Mero St., 19th Fl. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Receipt of Invoice from Vendor Receipt of Invoice from Vendor					
Program Consultant Street Address 500 Mero St., 19th FI. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 19th FI. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description Fund Source CFDA# 84.287C MUNIS Project Number MOA Number PON2 1400001850 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015 Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor Reimbursement Frequency: Monthly Quarterly Quarterly Other Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required				8	Method of Payment:
Street Address 500 Mero St., 19th FI. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th FI. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001850 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500	2	KDE Contact Information:	1011	W -	Federal Cash Request
Budget Contact Street Address Receipt of Invoice from Vendor Nonthly Quarterly Other Submission Other Submission of quarterly reimbursemer package Other Submission of quarterly reimbursemer package 10 Financial Reporting Method: Submission of quarterly reimbursemer package Other Submission of quarterly reimbursemer package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required		Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
Street Address City, KY Zip Frankfort, Kentucky 40601 Receipt of Invoice from Vendor		Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001850 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015		Budget Contact	Martha Johnson 502-564-1979 ext. 4358	-	Lump Sum
3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B Quarterly Quarterly Other		Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B Quarterly Quarterly Other		City, KY Zip	Frankfort, Kentucky 40601		·
3 Description/Fund Source of Award and Fiscal Year: Description				9	Reimbursement Frequency:
Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001850 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 6 Period of Award: August 1, 2014 - September 30, 2015 Cycle 9 10 Financial Reporting Method: □ Electronic Submission ○ Other Submission of quarterly reimbursemer package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required	3	Description/Fund Source o	of Award and Fiscal Year:		
Fund Source					
CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001850 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 6 Period of Award: August 1, 2014 - September 30, 2015					
MUNIS Project Number MOA Number See budget on contract MOA Number PON2 1400001850 Cycle 9 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$112,500 MUNIS Project Number PON2 1400001850 Cycle 9 Dother Submission of quarterly reimbursemer package 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required (See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015					
MOA Number PON2 1400001850 Cycle 9 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$112,500 Remark Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$112,500 See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015				10	Financial Reporting Method:
 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015 					
package Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015					
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015					
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015	4	Grant Authority (Source):			
General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015 Evaluations: Submission of an annual report to Kentucky Department of Education is required			2001, Title IV, Part B, Education Department		
Award Amount: MUNIS 5504 Amount \$112,500 (See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015 Award Amount: MUNIS 5504 Amount \$112,500 Kentucky Department of Education is required					
Kentucky Department of Education is required (See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015	5			11	Evaluations: Submission of an annual report to
6 Period of Award: August 1, 2014 - September 30, 2015 KENTUCKY DEPARTMENT OF EDUCATION			PROFICIENT & PRE	PAF	
August 1, 2014 - September 30, 2015 KENTUCKY DEPARTMENT OF EDUCATION			CHCC		CC
KENTUCKY DEPARTMENT OF EDUCATION	6		3 0 6 6		3 3
		August 1, 2014 - September			
1.17 Consortia/Partnership Members:	40	Consertie/Dowtwoodsin Man		OF E	DUCATION
•		•		()	
13 Special Instructions/Conditions: Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated	13				
in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts					
and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration			vill be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
Cabinet.					
14 Authorized By (Name/Title): Donna Tackett, Director Date: September 25, 2014	14	Authorized By (Name/Title)	·		Date: September 25, 2014
Division of Consolidated Plans & Audits			Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Corbin Independent		☐ State
	Street Address 108 Roy Kidd Avenue		
	City, State Zip Corbin, KY 40701		Other:
		8	Method of Payment:
2	KDE Contact Information:	M P	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	7//	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT	1//	Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT	•	Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21 st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2 1400001851 Cycles 8,9,10		Electronic Submission
	(V7) ()		Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):	11	
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department	100	
	General Administrative Regulations 34 CFR 76,77,80,82 and 85)
5	Award Amount: MUNIS 5504 \$75,000; MUNIS 5504C \$75,000; MUNIS	11,	Evaluations: Submission of an annual report to
	5504X \$67,500	-AI	Kentucky Department of Education is required
	(See MOA fee Dudent hands Jenny)	E	5 5
6	(See MOA for Budget breakdown) Period of Award:		
0	August 1, 2014 - September 30, 2015 KENTUCKY DEPARTMENT	or E	DUCATION
	August 1, 2014 - September 50, 2015 Kent Ock 1 Department		DOCATION
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Grants (New, Continuation, Expansi	ion) a	warded for five years/projects of funding, as stated
	in the Request for Application, based upon availability of funds from		
	and award notifications will be prepared based upon the timeframes		
	Cabínet.		
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
- •	Division of Consolidated Plans & Audits		
<u> </u>	2		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Covington Independent		☐ State
	Street Address 25 E. Seventh St.		
	City, State Zip Covington, KY 41011		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21 st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2 1300000088 Cycle 10		Electronic Submission
			Other Submission of quarterly reimbursement
		Δ	package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department		
_	General Administrative Regulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5504 Amount \$150,000	EPAI	Evaluations: Submission of an annual report to
	(See MOA for Budget breakdown)		Kentucky Department of Education is required
6	Period of Award:		3 3
	August 1 2014 - September 30 2015	-	
	Kentucky Departmen	r of E	DUCATION
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Grants (New, Continuation, Expansion)		
	in the Request for Application, based upon availability of funds fr		
	and award notifications will be prepared based upon the timefran	ies allo	wed by the Kentucky Finance & Administration
	Cabinet.		·
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
	Division of Consolidated Plans & Audits		

1	Name and Address of Rec	ipient:	7	Fund Type:
		n Independent		☐ State
	Street Address 25 E. Se	venth St.		□ Federal
	City, State Zip Covingto	n, Ky 41011		Other:
			8	Method of Payment:
2	KDE Contact Information:	1011	W III -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001852 Cycle 8		Electronic Submission
	Wie / Cramber	1 3112 1 10000 1002 Sydio 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			package
		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Crittende	en County		☐ State
	Street Address 601 W. B	Elm St.		□ Federal
	City, State Zip Marion,	KY 42064		Other:
			8	Method of Payment:
2	KDE Contact Information:	- 0 V C	V M	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
		. is	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001853 Cycles 9 & 10		Electronic Submission
	Wie / (rainbei	1 0142 1400001000 Cyclos 5 & 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	$c \cup c \subset c$		C C
6	Period of Award:	3 0 6 6		3 3
	August 22, 2014 - Septemb	The second secon		
40	0 11 /0 1	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		· ·	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Cumberl	and County		☐ State
	Street Address 810 N. N.	fain St.		
	City, State Zip Burkesvi	lle, KY 42717		Other:
			8	Method of Payment:
2	KDE Contact Information:		W -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	-	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		·
	•		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001854 Cycles 9 & 10		☐ Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		2001, Title IV, Part B, Education Department		
		ulations 34 CFR 76,77,80,82 and 85		
5		5504 \$112,500; MUNIS 5504C \$150,000	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
40		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Fayette	County		☐ State
	Street Address PO Box	55490		□ Federal
	City, State Zip Lexingto	n, KY 40555		Other:
			8	Method of Payment:
2	KDE Contact Information:	a DV C	W -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	-	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	76	Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B	,	Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001855 Cycles 8 & 9		Electronic Submission
		(V ₇)		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		1	
	No Child Left Behind Act of	2001, Title IV, Part B, Education Department	100	
	General Administrative Reg	ulations 34 CFR 76,77,80,82 and 85		>
5	Award Amount: MUNIS 5	504 \$150,000; MUNIS 5504X \$67,500	11	Evaluations: Submission of an annual report to
		PROFICIENT OF PRE	PAL	Kentucky Department of Education is required
_	(See MOA for Budget breakdown)			CC
6	Period of Award:	3 0 6		3 3
	August 1, 2014 - Septembe		-	
12	Consortia/Partnership Me	KENTUCKY DEPARTMENT	OF E	DUCATION
13	-		í oso) =:	avanta for fina ara ara karaja ata af fina din a at -t - f
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		wui ve preparea vasea upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
4.	Cabinet.) D T L ((D)		D . () 05 0044
14	Authorized By (Name/Title	•		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Floyd Co			☐ State
	Street Address 106 Nort	h Front Avenue		□ Federal
	City, State Zip Prestont	ourg, KY 41653		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W M -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	H/I	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	1	Monthly
	Description	21 st Century Community Learning Centers		□ Quarterly □ Qua
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001857 Cycle 9		Electronic Submission
	ING/CIVATIBET	1 ONE 1400001007 Oydic 5		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		11	paonago
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		2 2
	August 22, 2014 - Septemb	er 30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	wed by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red		7	Fund Type:
	Agency Name Fulton C	ounty		☐ State
	Street Address 2780 Mc	scow Ave.		
	City, State Zip Hickman	, KY 42050		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	, , , , , , , , , , , , , , , , , , ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001858 Cycles 8 & 9		Electronic Submission
	Wertramber	1 0142 1400001000 Cycles 0 & 5		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	1	
		ulations 34 CFR 76,77,80,82 and 85		
5		5504M \$112,500; MUNIS 5504H \$75,000	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		6 6
6	Period of Award:	3 0 6 6		3 3
	August 5, 2014 - Septembe	r 30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			-
14	Authorized By (Name/Title	e): Donna Tackett, Director		Date: September 25, 2014
	, ,	Division of Consolidated Plans & Audits		

1	Name and Address of Rec	•	7	Fund Type:
		dependent		☐ State
	Street Address 304 Wes	t State Line		□ Federal
	City, State Zip Fulton, K	Y 42041		Other:
			8	Method of Payment:
2	KDE Contact Information:	1011	W	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001859 Cycle 10		Electronic Submission
	Wertramber	1 3112 140000 1003 Gydle 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Reci	pient:	7	Fund Type:
	Agency Name Glasgow I	ndependent		☐ State
	Street Address 629 W. Cl	nerry St.		□ Federal
	City, State Zip Glasgow,	KY 42142		Other:
			8	Method of Payment:
2	KDE Contact Information:		V 100 -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source o	f Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		□ Quarterly □ Qua
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001860 Cycle 9		Electronic Submission
	ING/CIVATIBET	TOTAL THOUGHTOOD CYCLC S		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		1	puonage
•		001, Title IV, Part B, Education Department	11.	
		lations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 55		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - September	30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Men			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		vill be prepared based upon the timeframe.	s allov	wed by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title)	: Donna Tackett, Director		Date: September 25, 2014
	·	Division of Consolidated Plans & Audits		•
1	ı			

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Grayson	County		☐ State
	Street Address 909 Brar	ndenburg Rd.		□ Federal
	City, State Zip Leitchfie	ld, KY 42754		Other:
			8	Method of Payment:
2	KDE Contact Information:		W III	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, , , , , , , , , , , , , , , , , , ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	1	Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001861 Cycles 8 & 10		Electronic Submission
	West (Name)	1 0142 1400001001 Cycles o a 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		11	paonago
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe	r 30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			-
14	Authorized By (Name/Title	e): Donna Tackett, Director		Date: September 25, 2014
	,	Division of Consolidated Plans & Audits		·

1	Name and Address of Rec	ipient:	7	Fund Type:
	Agency Name Greenup	County		☐ State
	Street Address 45 Muske	eteer Dr.		□ Federal
	City, State Zip Greenup	, KY 41144		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W 100 -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	H//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001862 Cycle 10		Electronic Submission
	IVIO/ CIVATIBET	1 3142 140000 1002 3yole 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - September	30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Mer			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		vill be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			
14	Authorized By (Name/Title	•		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Hancock County		☐ State
	Street Address 83 State Rd.		□ Federal
	City, State Zip Hawesville, KY 42348		Other:
		8	Method of Payment:
2	KDE Contact Information:	M m -	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:	1	Monthly
	Description 21 st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2 1400001863 Cycle 9	10	Electronic Submission
	WOA Wallber		Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):	1	package
•	No Child Left Behind Act of 2001, Title IV, Part B, Education Department		
	General Administrative Regulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5504 Amount \$112,500	11	Evaluations: Submission of an annual report to
	PROFICIENT & PRI	EPAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)		C C
6	Period of Award:		2 2
	August 1, 2014 - September 30, 2015		
	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Grants (New, Continuation, Expan.		
	in the Request for Application, based upon availability of funds fro		
	and award notifications will be prepared based upon the timeframe	es allor	ved by the Kentucky Finance & Administration
	Cabinet.		
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
	Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Harlan C	County		☐ State
	Street Address 251 Ball	Park Rd.		□ Federal
	City, State Zip Harlan, I	Cy 40831		Other:
			8	Method of Payment:
2	KDE Contact Information:		W III -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, , , , , , , , , , , , , , , , , , ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001864 Cycle 8		Electronic Submission
	Wie / (rainbei	1 0142 1400001004 Gyold 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	•	7	Fund Type:
	Agency Name Hazard F	Perry County Community Ministries		☐ State
	Street Address 151 Miss	s Edna Ln.		□ Federal
	City, State Zip Hazard,	KY 41701		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W M -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	77	Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001892 Cycles 9 & 10		Electronic Submission
	West (Name)	1 3142 1400001002 Gyolds 5 & 10	1	Other Submission of quarterly reimbursement
			. \	package
4	Grant Authority (Source):		11	paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	EPAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe	r 30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			-
14	Authorized By (Name/Title	e): Donna Tackett, Director		Date: September 25, 2014
	,	Division of Consolidated Plans & Audits		

Agency Name Henderson County Street Address 1805 Second Street City, State Zip Henderson, KY 42420 **Reference City, State Zip Federal Cothers Street Address 500 Mero St., 19th Fl. CPT State Zip Henderson, KY 42420 **Reference City, State Zip Federal Cothers State Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY 42420 **Reference Zip Henderson, KY	1 Nam	me and Address of Reci	pient:	7	Fund Type:
City, State Zip Henderson, KY 42420 City State Zip Henderson	Agen	ency Name Henderso	n County		☐ State
Steet Address 500 Mero St., 19th Fl. CPT Street Address 500 Mero St., 19th Fl. CPT Street Address 500 Mero St., 16th Fl. CPT Lump Sum Receipt of Invoice from Vendor Street Address 500 Mero St., 16th Fl. CPT Lump Sum Receipt of Invoice from Vendor Street Address 500 Mero St., 16th Fl. CPT Lump Sum Receipt of Invoice from Vendor Receipt of Invoice from Vendor Street Address 500 Mero St., 16th Fl. CPT Lump Sum Receipt of Invoice from Vendor Receipt of Invoice from Vendor Street Address Street Addres	Stree	eet Address 1805 Sec	ond Street		□ Federal
2 KDE Contact Information:	City,	y, State Zip Henderso	n, KY 42420		Other:
2 KDE Contact Information:					
Program Consultant Street Address Street Address Brigette Stacy 502-564-1473 ext. 4072 Street Address Automatic Payment Lump Sum Receipt of Invoice from Vendor Description/Fund Source of Award and Fiscal Year:				8	Method of Payment:
Street Address 500 Mero St., 19th FI. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th FI. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001865 Cycles 9 & 10 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department	2 KDE	E Contact Information:	- OV C	W III	Federal Cash Request
Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001865 Cycles 9 & 10 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department	Prog	ogram Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
Street Address City, KY Zip Street Address Frankfort, Kentucky 40601 Street Address City, KY Zip Street Address Frankfort, Kentucky 40601 Street Address Grant Authority Frankfort, Kentucky 40601 Street Address Frankfort, Kentucky 40601 Street Address Grant Authority Frankfort, Kentucky 40601 Street Authority	Stree	eet Address	500 Mero St., 19th Fl. CPT		Automatic Payment
City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description	Budg	dget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
3 Description/Fund Source of Award and Fiscal Year: Description Pund Source Description Pund Source Description Pund Source No Child Left Behind Act, Title IV, Part B CFDA# No Child Left Behind Act of 2001, Title IV, Part B, Education Department 9 Reimbursement Frequency: Monthly Quarterly Quarterly Other 10 Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package	Stree	eet Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description	City,	y, KY Zip	Frankfort, Kentucky 40601		
3 Description/Fund Source of Award and Fiscal Year: Description		•		9	Reimbursement Frequency:
Description Fund Source CFDA# MUNIS Project Number MOA Number 4 Grant Authority (Source): No Child Left Behind Act, Title IV, Part B, Education Department Description 21st Century Community Learning Centers No Child Left Behind Act, Title IV, Part B No Child Left Behind Act, Title IV, Part B No Child Left Behind Act of 2001, Title IV, Part B, Education Department Quarterly Other Submission Other Submission of quarterly reimbursement package	3 Desc	scription/Fund Source o	f Award and Fiscal Year:		
Fund Source CFDA# 84.287C MUNIS Project Number MOA Number PON2 1400001865 Cycles 9 & 10 Grant Authority (Source): No Child Left Behind Act, Title IV, Part B B4.287C MUNIS Project Number PON2 1400001865 Cycles 9 & 10 Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package					Quarterly
CFDA# MUNIS Project Number MOA Number See budget on contract MOA Number PON2 1400001865 Cycles 9 & 10 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department See budget on contract PON2 1400001865 Cycles 9 & 10 Financial Reporting Method: Contract Department Other Submission of quarterly reimbursement Package					
MOA Number PON2 1400001865 Cycles 9 & 10 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department	CFD	DA#			
MOA Number PON2 1400001865 Cycles 9 & 10 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department	MUN	JNIS Project Number	See budget on contract	10	Financial Reporting Method:
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department					
package Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department					
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department					
No Child Left Behind Act of 2001, Title IV, Part B, Education Department	4 Gran	ant Authority (Source):			
			2001, Title IV, Part B, Education Department		
General Administrative Regulations 34 CFR 76,77,80,82 and 85					
5 Award Amount: MUNIS 5504 \$112,500; MUNIS 5504J \$150,000 11 Evaluations: Submission of an annual report to				11	Evaluations: Submission of an annual report to
Kentucky Department of Education is required			PROFICIENT & PRE	PAF	Kentucky Department of Education is required
(See MOA for Budget breakdown)			CHCC		CC
6 Period of Award:	-		3 0 6 6		3 3
August 1, 2014 - September 30, 2015	Augu	gust 1, 2014 - September		-	
KENTUCKY DEPARTMENT OF EDUCATION	40 000	no outio/Doute oughin Mon		OF E	DUCATION
12 Consortia/Partnership Members:		-		()	
13 Special Instructions/Conditions: Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as state					
in the Request for Application, based upon availability of funds from the United States Department of Education. Contract					
and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration			vill be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
Cabínet.					
14 Authorized By (Name/Title): Donna Tackett, Director Date: September 25, 2014	14 Auth	thorized By (Name/Title)	·		Date: September 25, 2014
Division of Consolidated Plans & Audits			Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Hickman County		☐ State
	Street Address 416 Waterfield Dr. N.		
	City, State Zip Clinton, KY 42031		Other:
		8	Method of Payment:
2	KDE Contact Information:	M P	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	4//	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21 st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B)	Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2 1400001866 Cycle 8		☐ Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):	11	-
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department	10	
	General Administrative Regulations 34 CFR 76,77,80,82 and 85		•
5	Award Amount: MUNIS 5504 Amount \$75,000	11	Evaluations: Submission of an annual report to
	PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)		CC
6	Period of Award:		3 3
	August 1, 2014 - September 30, 2015	-	
40	KENTUCKY DEPARTMENT	DF E	DUCATION
12	Consortia/Partnership Members:	· · · · · ·	and the transfer of the transf
13	Special Instructions/Conditions: Grants (New, Continuation, Expansi		
	in the Request for Application, based upon availability of funds from		
	and award notifications will be prepared based upon the timeframes	allov	ved by the Kentucky Finance & Administration
	Cabinet.		
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
	Division of Consolidated Plans & Audits		

Agency Name Street Address 940 Highland Ave. Street Address 940 Highland Ave. 2 KDE Contact Information: Program Consultant Brigette Stacy 502-564-1473 ext. 4072 Street Address 500 Mero St., 19th Fl. CPT Street Address 500 Mero St., 19th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B 84.287C MUNIS Project Number MOA Number See budget on contract MOA Number See budget on contract General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 6 Period of Award: August 1, 2014 - September 30, 2015 12 Consortia/Partnership Members:	1	Name and Address of Red	ipient:	7	Fund Type:
City, State Zip Jackson, KY 41339 City, State Zip Jackson, KY 41339 Cher:		Agency Name Jackson	Independent		☐ State
August 1, 2014 - September 30, 2015 September		Street Address 940 High	land Ave.		
REPECANT Program Consultant Brigette Stacy 502-564-1473 ext. 4072 Street Address 500 Mero St., 19th Fl. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Receipt of Invoice from Vendor Receipt of Invoice from Vendor		City, State Zip Jackson	KY 41339		Other:
REPECANT Program Consultant Brigette Stacy 502-564-1473 ext. 4072 Street Address 500 Mero St., 19th Fl. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Receipt of Invoice from Vendor Receipt of Invoice from Vendor					
Program Consultant Street Address 500 Mero St., 19th FI. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th FI. CPT City, KY Zip Frankfort, Kentucky 40601 Description/Fund Source of Award and Fiscal Year: Description Fund Source No Child Left Behind Act, Title IV, Part B CFDA# MOA Number MOA Number PON2 1400001867 Cycle 10 Reimbursement Frequency: Monthly Quarterly Other City, Part B CFDA# MOA Number PON2 1400001867 Cycle 10 Pinancial Reporting Method: Electronic Submission Other Submission Other Submission of quarterly reimbursemer package 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015				8	Method of Payment:
Street Address 500 Mero St., 19th Fl. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001867 Cycle 10 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 6 Period of Award: August 1, 2014 - September 30, 2015	2	KDE Contact Information:	- 01/6	I III	Federal Cash Request
Budget Contact Street Address Receipt of Invoice from Vendor Receipt of Invoice from Vendor Page Reimbursement Frequency: Monthly Quarterly Other Other Submission Other Submission of quarterly reimbursement general Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$75,000 See MOA for Budget breakdown) Feriod of Award: August 1, 2014 - September 30, 2015		Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	4//	Expenditure Reimbursement
Street Address City, KY Zip Frankfort, Kentucky 40601 Receipt of Invoice from Vendor		Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001867 Cycle 10 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015		Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B Quarterly Quarterly Other		Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B Quarterly Quarterly Other		City, KY Zip	Frankfort, Kentucky 40601		
Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001867 Cycle 10 Working Pon2 1400001867 Cycle 10 Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursemer package Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$75,000 Period of Award: August 1, 2014 - September 30, 2015 Award Amount: MUNIS 5504 Amount \$75,000 Contact Pon2 Indicate Indica		•		9	Reimbursement Frequency:
Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001867 Cycle 10 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 CSee MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015	3	Description/Fund Source	of Award and Fiscal Year:		
Fund Source					
CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001867 Cycle 10 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 6 Period of Award: August 1, 2014 - September 30, 2015					
MUNIS Project Number MOA Number See budget on contract MOA Number PON2 1400001867 Cycle 10 □ Electronic Submission □ Other Submission of quarterly reimbursemer package 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 11 Evaluations: Submission of an annual report to Kentucky Department of Education is required (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015					
MOA Number PON2 1400001867 Cycle 10 □ Clectronic Submission Other Submission of quarterly reimbursemer package 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 CSee MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015				10	Financial Reporting Method:
 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$75,000 (See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015 					
package Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 Amount \$75,000 See MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015					
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015					
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015	4	Grant Authority (Source):		1	- 3
General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 Amount \$75,000 (See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015			2001, Title IV, Part B, Education Department	11	
Award Amount: MUNIS 5504 Amount \$75,000 Gee MOA for Budget breakdown) Period of Award: August 1, 2014 - September 30, 2015 Award Amount: MUNIS 5504 Amount \$75,000 Kentucky Department of Education is required					
(See MOA for Budget breakdown) 6 Period of Award: August 1, 2014 - September 30, 2015	5			11	Evaluations: Submission of an annual report to
6 Period of Award: August 1, 2014 - September 30, 2015 KENTUCKY DEPARTMENT OF EDUCATION			PROFICIENT & PRE	PAF	
August 1, 2014 - September 30, 2015 KENTUCKY DEPARTMENT OF EDUCATION			CHCC		CC
KENTUCKY DEPARTMENT OF EDUCATION	6		3 0 6 6		3 3
		August 1, 2014 - Septembe			
12 Consortia/Partnersnip Members:	40	Compositio/Doutmondin Mo		OF E	DUCATION
40 Chariel Instructional Conditionar County (ACC) Continue tion (C.) (C.C. (C.) (C.C. (C.))		<u> </u>		\	
13 Special Instructions/Conditions: Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated	13				
in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts					
and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration			will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
Cabinet.					
14 Authorized By (Name/Title): Donna Tackett, Director Date: September 25, 2014	14	Authorized By (Name/Title	·		Date: September 25, 2014
Division of Consolidated Plans & Audits			Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Jenkins	Independent		☐ State
	Street Address 269 Old	Highway 3086		□ Federal
	City, State Zip Jenkins,	KY 41537		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W M -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	1	Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001868 Cycle 8		Electronic Submission
	West (Name)	1 0142 1400001000 Cyolc 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		11	paonago
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

Agency Name Kenton County YMCA Street Address 1055 Eaton Dr. City, State Zip Fort Wright, KY 41017 **Rederal**	1
City, State Zip Fort Wright, KY 41017 Other:	ļ
Street Address Summarian Summarian Street Address Summarian Summ	
2 KDE Contact Information:	
2 KDE Contact Information:	
Program Consultant Street Address Stop Mero St., 19th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Bescription/Fund Source of Award and Fiscal Year: Description Pescription Description Substreet Address Fund Source Fund Source Fund Source No Child Left Behind Act, Title IV, Part B CFDA# B4.287C MUNIS Project Number MOA Number See budget on contract MOA Number PON2 1400001893 Cycle 8 Reimbursement Frequency: Monthly Quarterly Other Other Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
Street Address 500 Mero St., 19th FI. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th FI. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001893 Cycle 8 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
Budget Contact Street Address Street Address Street Address City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description Pund Source Fund Source CFDA# MUNIS Project Number MOA Number 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Lump Sum Receipt of Invoice from Vendor	
Street Address 500 Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001893 Cycle 8 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description	
3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001893 Cycle 8 Submission Other Submission Other Submission of quarterly reimbursement Description 21st Century Community Learning Centers Quarterly Quarterly Other Other Description Other Description Description Description Other Description Descr	
3 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001893 Cycle 8 Submission Other Submission Other Submission of quarterly reimbursement Description 21st Century Community Learning Centers Quarterly Quarterly Other Other Description Other Description Description Description Other Description Descr	
3 Description/Fund Source of Award and Fiscal Year: Description	
Description Fund Source Fund Source CFDA# MUNIS Project Number MOA Number Grant Authority (Source): No Child Left Behind Act, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Quarterly Other The policy Courterly Other Submission Other Submission of quarterly reimbursement package	
Fund Source CFDA# S4.287C MUNIS Project Number MOA Number Grant Authority (Source): No Child Left Behind Act, Title IV, Part B See budget on contract PON2 1400001893 Cycle 8 Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001893 Cycle 8 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
MUNIS Project Number MOA Number See budget on contract MOA Number PON2 1400001893 Cycle 8 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 MUNIS Project Number See budget on contract PON2 1400001893 Cycle 8 Electronic Submission Other Submission of quarterly reimbursement package	
MOA Number PON2 1400001893 Cycle 8 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
Other Submission of quarterly reimbursement package 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
package Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	ment
4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85	
General Administrative Regulations 34 CFR 76,77,80,82 and 85	
5 Award Amount: MUNIS 5504C Amount \$60,000 11 Evaluations: Submission of an annual report to	
Kentucky Department of Education is required	
(See MOA for Budget breakdown)	
6 Period of Award:	
August 5, 2014 - September 30, 2015	
KENTUCKY DEPARTMENT OF EDUCATION	
12 Consortia/Partnership Members:	
13 Special Instructions/Conditions: Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as stated	
in the Request for Application, based upon availability of funds from the United States Department of Education. Contrac	
and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration	L
Cabínet.	
14 Authorized By (Name/Title): Donna Tackett, Director Date: September 25, 2014	
Division of Consolidated Plans & Audits	

1	Name and Address of Red	ipient:	7	Fund Type:	
	Agency Name Knott Co			☐ State	
	Street Address 1156 Hir	dman Bypass			
	City, State Zip Hindmar	, KY 41822		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	OVC	WW -	Federal Cash Request	
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement	
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment	
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum	
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, Kentucky 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source	of Award and Fiscal Year:		Monthly	
	Description	21 st Century Community Learning Centers		Quarterly	
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other	
	CFDA#	84.287C			
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:	
	MOA Number	PON2 1400001869 Cycle 10		☐ Electronic Submission	
		~ [V7] (]		Other Submission of quarterly reimbursement	
				package	
4	Grant Authority (Source):				
		2001, Title IV, Part B, Education Department	10		
	General Administrative Regulations 34 CFR 76,77,80,82 and 85				
5	Award Amount: MUNIS 5	504 Amount \$150,000	11	Evaluations: Submission of an annual report to	
		I NOFICIENT ON I NE	PAI	Kentucky Department of Education is required	
6	(See MOA for Budget breakdown) Period of Award:	- S U C C	-15	5 5	
0	August 1, 2014 - Septembe	20 2015	Minney.		
	August 1, 2014 - Septembe	KENTUCKY DEPARTMENT	OF E	DUCATION	
12	Consortia/Partnership Me			DOCATION	
13	Special Instructions/Cond	itions: Grants (New, Continuation, Expans	íon) a	warded for five years/projects of funding, as stated	
				United States Department of Education. Contracts	
				wed by the Kentucky Finance & Administration	
	Cabínet.	y y		,	
14	Authorized By (Name/Title	e): Donna Tackett, Director		Date: September 25, 2014	
	, ,	Division of Consolidated Plans & Audits		· · · · · · · · · · · · · · · · · · ·	

1	Name and Address of Rec	ipient:	7	Fund	-
	Agency Name Lee Cour	nty			State
	Street Address 242 Lee	Ave.		\boxtimes	Federal
	City, State Zip Beattyvil	le, KY 41311			Other:
	•				
			8	Metho	od of Payment:
2	KDE Contact Information:				Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072			Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT	-4/		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358			Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT			Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601			·
		Z AND	9	Reimb	pursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:			Monthly
	Description	21 st Century Community Learning Centers		\boxtimes	Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B			Other
	CFDA#	84.287C			
	MUNIS Project Number	See budget on contract	10	Finan	cial Reporting Method:
	MOA Number	PON2 1300000124 Cycle 8			Electronic Submission
					Other Submission of quarterly reimbursement
			1	-	package
4	Grant Authority (Source):				
		2001, Title IV, Part B, Education Department			
		ulations 34 CFR 76,77,80,82 and 85			
5	Award Amount: MUNIS 5	504C Amount \$60,000	PAI		ations: Submission of an annual report to
		C 11 C C		Kentud	cky Department of Education is required
6	(See MOA for Budget breakdown) Period of Award:	- 5 U C C			5
O	August 1, 2014 - September	30, 2015		0.52-500	
	August 1, 2014 - September	KENTUCKY DEPARTMENT	OF E	DUCA	TION
12	Consortia/Partnership Mer	nbers:			
13					for five years/projects of funding, as stated
					States Department of Education. Contracts
		vill be prepared based upon the timeframe			
	Cabínet.			,	
14	Authorized By (Name/Title): Donna Tackett, Director		Date:	September 25, 2014
	• •	Division of Consolidated Plans & Audits			•

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Leslie Co	ounty		☐ State
	Street Address 27 Eagle	e Ln.		
	City, State Zip Hyden, k	(Y 41749		Other:
			8	Method of Payment:
2	KDE Contact Information:	016	W	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37	, , , , , , , , , , , , , , , , , , ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001871 Cycles 9 & 10		Electronic Submission
	West (Name)	1 0142 1400001071		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	1	
		ulations 34 CFR 76,77,80,82 and 85		
5		5504 \$112,500; MUNIS 5504X \$150,000	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Letcher	County		☐ State
	Street Address 224 Park	ks St.		
	City, State Zip Whitesb	urg, KY 41858		Other:
			8	Method of Payment:
2	KDE Contact Information:		VIII -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	-	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001872 Cycles 8 & 10		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			-
		2001, Title IV, Part B, Education Department	11	
		Julations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT OF PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe		-	
40	Consortio/Doutropublic Ma	KENTUCKY DEPARTMENT	OF L	DUCATION
12	Consortia/Partnership Me		ź\	and of the first and and and a the first first and first
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	•		Date: September 25, 2014
l		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Lighthouse Promise, Inc		☐ State
	Street Address 5312 Old Sheperdville Rd.		
	City, State Zip Louisville, KY 40228		Other:
		8	Method of Payment:
2	KDE Contact Information:	VI CIN	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4	1072	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext	4358	Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601	55	
	Traintiert, Northwest, 1999	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21 st Century Community Learning	Centers	☐ Monthly Quarterly
	Fund Source No Child Left Behind Act, Title IV, I		Other
	CFDA# 84.287C	alt b	U Other
		10	Einanaial Banarting Mathods
	MUNIS Project Number See budget on contract MOA Number PON2 1400001894 Cycles 8 & 10		Financial Reporting Method: Electronic Submission
	MOA Number PONZ 1400001694 Cycles 6 & 10		
		\	Other Submission of quarterly reimbursement package
4	Grant Authority (Source):		package
7	No Child Left Behind Act of 2001, Title IV, Part B, Education Dep	partment	
	General Administrative Regulations 34 CFR 76,77,80,82 and 85	dillient	
5	Award Amount: MUNIS 5504 \$67,500; MUNIS 5504X \$75,000	0 0 11	Evaluations: Submission of an annual report to
J	Awaid Amount. Works 3304 \$07,300, Works 3304X \$73,000	Y PREPA	Kentucky Department of Education is required
	(See MOA for Budget breakdown)		Rentacky Department of Education is required
6	Period of Award:	E	5 5
	August 1, 2014 - September 30, 2015		
	KENTUCKY DEPAR	TMENT OF	EDUCATION
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: Grants (New, Continuation	n, Expansion)	awarded for five years/projects of funding, as stated
	in the Request for Application, based upon availability of j		
	and award notifications will be prepared based upon the ti		
	Cabínet.	<i>y</i> :	<i>y</i>
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
• •	Division of Consolidated Plans 8	& Audits	2 313. 3 3 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	2 moion or compositation of		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Lincoln (County		☐ State
	Street Address 305 Dan	ville Ave.		□ Federal
	City, State Zip Stanford	, KY 40484		Other:
			8	Method of Payment:
2	KDE Contact Information:		N III	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	•		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001873 Cycle 9		Electronic Submission
		TOTAL TROOPERS		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		2001, Title IV, Part B, Education Department	1	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe		-	
40	O	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		<i>.</i>	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Livingsto	on County		☐ State
	Street Address 127 E. A	dair St.		□ Federal
	City, State Zip Smithlar	id, KY 42081		Other:
			8	Method of Payment:
2	KDE Contact Information:	1011	W III -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001874 Cycles 8 & 9		Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		1	
		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT OF PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
40	Concertie/Dowtwovekin Ma	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		. () -	and the fire the angle of the fire to the
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		wui be preparea based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
<u> </u>	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Lotts Creek Community School		☐ State
	Street Address 5837 Lotts Creek Road		□ Federal
	City, State Zip Hazard, KY 41701-9024		Other:
		8	Method of Payment:
2	KDE Contact Information:	N. D.	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	M/	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext. 4358	_ ~ 4	Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
	Trainion, Northwesty 10001	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21 st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2 1400001895 Cycle 8	10	Electronic Submission
	IVIOA Nullibei PONZ 140000 1695 Cycle 6		Other Submission of quarterly reimbursement
		. \	package
4	Grant Authority (Source):	A. 1.	раскаде
7	No Child Left Behind Act of 2001, Title IV, Part B, Education Department		
	General Administrative Regulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5504 Amount \$75,000	11	Evaluations: Submission of an annual report to
	PROFICIENT & PR	EPAI	Kentucky Department of Education is required
	(See MOA for Budget breakdown)		Trontanty Bepartment of Education to required
6	Period of Award:		5 5
	August 1, 2014 - September 30, 2015		(a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-a-
	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Members:	2500°F (5)	2 NO. 1847 (1947) - 1 NO. 1747 (1947) - 1
13	Special Instructions/Conditions: Grants (New, Continuation, Expan		
	in the Request for Application, based upon availability of funds fro	m the	United States Department of Education. Contracts
	and award notifications will be prepared based upon the timefram		
	Cabinet.		
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
	Division of Consolidated Plans & Audits		-1, -
<u> </u>			

Agency Name	Federal Other:
City, State Zip Eddyville, KY 42038 Other:	Other:
Street Address Str	
Rogram Consultant	
Rogram Consultant	
Program Consultant Street Address Sto Mero St., 16th Fl. CPT City, KY Zip Frankfort, Kentucky 40601 Bescription/Fund Source of Award and Fiscal Year: Description Prind Source No Child Left Behind Act, Title IV, Part B CFDA# B4.287C MUNIS Project Number MOA Number Bescription See budget on contract MOA Number PON2 1400001875 Cycle 9 Bescription Submission of quarterly reimbursement General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 X Amount \$67,500 Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor Reimbursement Frequency: Quarterly Quarterly Quarterly Other Submission of quarterly reimbursement Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Expenditure Reimbursement Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Automatic Payment Submission of Invoice from Vendor Pond Invoice from Vendor Receipt of Invoice from Vendor Pond Invoice from Vendor Receipt of Invoice from Vendor Pond Invoice from Vendor Receipt of Invoice from Vendor	d of Payment:
Street Address 500 Mero St., 19th FI. CPT Budget Contact Martha Johnson 502-564-1979 ext. 4358 Street Address 500 Mero St., 16th FI. CPT City, KY Zip Frankfort, Kentucky 40601 Description/Fund Source of Award and Fiscal Year: Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001875 Cycle 9 Pon2 1400001875 Cycle 9 Reimbursement Frequency: Monthly Quarterly Other Financial Reporting Method: Description Submission of quarterly reimbursement package 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 X Amount \$67,500 Automatic Payment Lump Sum Receipt of Invoice from Vendor Recei	Federal Cash Request
Budget Contact Street Address Award Amount: Martha Johnson 502-564-1979 ext. 4358 Street Address Submission Frequency: Monthly Squarterly Squarterly Other Submission Other Submission of quarterly reimbursement package Street Address Submission of an annual report to	Expenditure Reimbursement
Street Address City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description Fund Source Fund Source Fund Source No Child Left Behind Act, Title IV, Part B CFDA# MOA Number 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 X Amount \$67,500 Receipt of Invoice from Vendor Receipt of	Automatic Payment
City, KY Zip Frankfort, Kentucky 40601 3 Description/Fund Source of Award and Fiscal Year: Description 21 st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001875 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 X Amount \$67,500 PReimbursement Frequency: Monthly Quarterly Other Cuarterly Other CFDA# Submission of quarterly reimbursement General Administrative Regulations 34 CFR 76,77,80,82 and 85	Lump Sum
3 Description/Fund Source of Award and Fiscal Year: Description D	Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description D	·
3 Description/Fund Source of Award and Fiscal Year: Description	ursement Frequency:
Description 21st Century Community Learning Centers Fund Source No Child Left Behind Act, Title IV, Part B CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001875 Cycle 9 4 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 X Amount \$67,500 Quarterly Other Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package 10 Financial Reporting Method: Electronic Submission of quarterly reimbursement package	
Fund Source CFDA# S4.287C MUNIS Project Number MOA Number General Administrative Regulations 34 CFR 76,77,80,82 and 85 No Child Left Behind Act, Title IV, Part B 84.287C MUNIS Project Number See budget on contract PON2 1400001875 Cycle 9 Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package 10 Financial Reporting Method: Dother Submission of quarterly reimbursement package 11 Evaluations: Submission of an annual report to	
CFDA# 84.287C MUNIS Project Number See budget on contract MOA Number PON2 1400001875 Cycle 9 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 MUNIS Project Number See budget on contract Department Submission Other Submission of quarterly reimbursement package Award Amount: MUNIS 5504 X Amount \$67,500 MUNIS Project Number See budget on contract Department Submission of quarterly reimbursement package I Evaluations: Submission of an annual report to	
MUNIS Project Number MOA Number See budget on contract PON2 1400001875 Cycle 9 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 MUNIS Project Number PON2 1400001875 Cycle 9 Electronic Submission of quarterly reimbursement package 10 Financial Reporting Method: Dother Submission of quarterly reimbursement package 11 Evaluations: Submission of an annual report to	
MOA Number PON2 1400001875 Cycle 9 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 MOA Number Electronic Submission Other Submission of quarterly reimbursement package 11 Evaluations: Submission of an annual report to	ial Reporting Method:
 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 X Amount \$67,500 Evaluations: Submission of quarterly reimbursement package 	
d Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 X Amount \$67,500 11 Evaluations: Submission of an annual report to	
 Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 Award Amount: MUNIS 5504 X Amount \$67,500 Evaluations: Submission of an annual report to 	• •
No Child Left Behind Act of 2001, Title IV, Part B, Education Department General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 X Amount \$67,500 11 Evaluations: Submission of an annual report to	1 2 2 3 2
General Administrative Regulations 34 CFR 76,77,80,82 and 85 5 Award Amount: MUNIS 5504 X Amount \$67,500 11 Evaluations: Submission of an annual report to	
5 Award Amount: MUNIS 5504 X Amount \$67,500 11 Evaluations: Submission of an annual report to	
	ations: Submission of an annual report to
Nontacky Department of Education is required	ky Department of Education is required
(See MOA for Budget breakdown)	C
6 Period of Award:	3
August 1, 2014 - September 30, 2015	
KENTUCKY DEPARTMENT OF EDUCATION	CION
12 Consortia/Partnership Members:	
13 Special Instructions/Conditions: Grants (New, Continuation, Expansion) awarded for five years/projects of funding, as state	
in the Request for Application, based upon availability of funds from the United States Department of Education. Contract	
and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration	he Kentucky Finance & Administration
Cabínet.	
14 Authorized By (Name/Title): Donna Tackett, Director Date: September 25, 2014	September 25, 2014
Division of Consolidated Plans & Audits	

1	Name and Address of Red	ipient:	7	Fund Type:
	Agency Name McCrack	en County		☐ State
	Street Address 404 Sou	th Main Street		□ Federal
	City, State Zip Jamesto	wn, KY 42629		Other:
	•			
			8	Method of Payment:
2	KDE Contact Information:		V M	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001876 Cycles 9 & 10		Electronic Submission
	West realises	1 3112 1 10000 1070 System of a 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonage
		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Metcalfe	County		☐ State
	Street Address 109 Sart	in Dr.		□ Federal
	City, State Zip Edmonto	on, KY 42129		Other:
			8	Method of Payment:
2	KDE Contact Information:	01/6	W	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	4//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001877 Cycles 8 & 9		Electronic Submission
	West rames	TOTAL TROOPERTY System of the		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			parage
-		2001, Title IV, Part B, Education Department	1	
		ulations 34 CFR 76,77,80,82 and 85		
5		504 \$75,000; MUNIS 5504X \$67,500	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
40	0 11 /0 1	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		<i>.</i> .	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	•		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Monroe	County		State
	Street Address 309 Emb	perton Street		
	City, State Zip Tompkin	nsville, KY 42167-1431		Other:
_		- OV C	8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
_			9	Reimbursement Frequency:
3	•	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 130000154 Cycles 9		Electronic Submission
			1	Other Submission of quarterly reimbursement
4	Grant Authority (Source):			package
4		2001, Title IV, Part B, Education Department		
		gulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
	(See MOA for Budget breakdown)	S II C C		Kentucky Department of Education is required
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe	er 30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13	•			
_	Special Instructions/Cond			warded for five years/projects of funding, as stated
	Special Instructions/Conc in the Request for Applic	cation, based upon availability of funds from	m the	United States Department of Education. Contracts
	Special Instructions/Cond in the Request for Applicand award notifications	cation, based upon availability of funds from	m the	
	Special Instructions/Cond in the Request for Applicand award notifications Cabinet.	cation, based upon availability of funds from will be prepared based upon the timeframe	m the	United States Department of Education. Contracts wed by the Kentucky Finance & Administration
14	Special Instructions/Cond in the Request for Applicand award notifications	cation, based upon availability of funds from will be prepared based upon the timeframe	m the	United States Department of Education. Contracts

1	Name and Address of Red	•	7	Fund Type:
	Agency Name Monroe	County		☐ State
	Street Address 309 Emb	perton Street		□ Federal
	City, State Zip Tompkin	sville, KY 42167-1431		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	W -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001878 Cycles 8,9&10		Electronic Submission
	West ramber	1 3112 1 10000 1070		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paoriago
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5		5504 \$135,000; MUNIS 5504X \$ 142,500	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAR	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Morgan	County		☐ State
	Street Address 212 Univ	versity Dr.		□ Federal
	City, State Zip West Lib	ery, KY 41472		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W M -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	H/I	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	1	Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001879 Cycle 8		Electronic Submission
	ING/CIVATIBET	1 ONE 1400001075 Sydie 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		11	paonago
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ipient:	7	Fund Type:
	Agency Name Nelson (County		☐ State
	Street Address 288 Wild	cat Lane		□ Federal
	City, State Zip Bardstov	vn, Ky 40004		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DVC	N III	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	, ,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001880 Cycle 9		Electronic Submission
	West realises	1 SINZ 1 10000 1000 Sydio 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paoriago
		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
40	0 (1/5)	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		· ·	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Reci	pient:	7	Fund Type:
	Agency Name Newport I	ndependent		State
	Street Address 301 E. Eig	hth St.		☑ Federal
	City, State Zip Newport,	KY 41071		Other:
			8	Method of Payment:
2	KDE Contact Information:		I III	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	4//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source o	f Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001881 Cycles 8 & 10		☐ Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		1	
		001, Title IV, Part B, Education Department		
		lations 34 CFR 76,77,80,82 and 85		
5		04 \$75,000; MUNIS 5504X \$75,000	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - September			
40	0 11 /0 1	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Mem			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		ill be prepared based upon the timeframe:	s allov	wed by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title)	•		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Paducah Independent		☐ State
	Street Address 800 Caldwell St.		□ Federal
	City, State Zip Paducah, KY 42003		Other:
		8	Method of Payment:
2	KDE Contact Information:	W W -	Federal Cash Request
	Program Consultant Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address 500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address 500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, Kentucky 40601		
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description 21 st Century Community Learning Centers		Quarterly
	Fund Source No Child Left Behind Act, Title IV, Part B		Other
	CFDA# 84.287C		
	MUNIS Project Number See budget on contract	10	Financial Reporting Method:
	MOA Number PON2 1400001882 Cycle 10		Electronic Submission
			Other Submission of quarterly reimbursement
			package
4	Grant Authority (Source):		
	No Child Left Behind Act of 2001, Title IV, Part B, Education Department		
	General Administrative Regulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5504 Amount \$150,000	11	Evaluations: Submission of an annual report to
	PROFICIENT OX PRE	PAL	Kentucky Department of Education is required
	(See MOA for Budget breakdown)		CC
6	Period of Award:		3 3
	August 1, 2014 - September 30, 2015	-	
12	Consortia/Partnership Members:	OF E	DUCATION
12 13	•	iá ona) s	avandad for fina avagra/meninata of fina dia a cast-t-f
13	Special Instructions/Conditions: Grants (New, Continuation, Expans		
	in the Request for Application, based upon availability of funds from		
	and award notifications will be prepared based upon the timeframe	s allov	vea by the Kentucky Jinance & Administration
4.4	Cabinet.		Datas Cantanahan 05 0044
14	Authorized By (Name/Title): Donna Tackett, Director		Date: September 25, 2014
	Division of Consolidated Plans & Audits		

1	Name and Address of Red		7	Fund Type:
	Agency Name Pleasant	t Green Baptist Church		State
		k 910240		
	City, State Zip Lexingto	n, KY 40591		☐ Other:
			8	Method of Payment:
2	KDE Contact Information:	CKIU		Federal Cash Request Expenditure Reimbursement
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1300000165 Cycle 10		☐ Electronic Submission
				Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			
		2001, Title IV, Part B, Education Department		
	General Administrative Reg	ulations 34 CFR 76,77,80,82 and 85	DAG	DED FOR
5	Award Amount: MUNIS 5	5504C Amount \$75,000	11	Evaluations: Submission of an annual report to
		SUCC		Kentucky Department of Education is required
6	(See MOA for Budget breakdown) Period of Award:	5 0 0 0		
O		r 30, 2015 KENTUCKY DEPARTMENT	OF E	DUCATION
	August 1, 2014 - Septembe	130, 2013 RENTOCKI DEPARTMENT		BOCKHON
12	Consortia/Partnership Me	mbers:		
13	Special Instructions/Cond	litions: Grants (New, Contínuatíon, Expans	íon) a	warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
				wed by the Kentucky Finance & Administration
	Cabínet.			J
14	Authorized By (Name/Title	e): Donna Tackett, Director		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Recipient	:	7	Fund Type:	
	Agency Name Pleasant Gree	n Baptist Church		State	
	Street Address P.O. Box 9102	40			
	City, State Zip Lexington, KY	40591		Other:	
				_	
			8	Method of Payn	nent:
2	KDE Contact Information:	- 0V C	V III -	Federal C	Cash Request
	Program Consultant Brig	ette Stacy 502-564-1473 ext. 4072	HII	Expenditu	ure Reimbursement
		Mero St., 19th Fl. CPT			c Payment
	Budget Contact Mar	tha Johnson 502-564-1979 ext. 4358		Lump Sui	
	Street Address 500	Mero St., 16th Fl. CPT			f Invoice from Vendor
		nkfort, Kentucky 40601			
	,, ,		9	Reimbursemen	t Frequency:
3	Description/Fund Source of Aw	ard and Fiscal Year:		Monthly	. ,
		Century Community Learning Centers		Quarterly	
	•	Child Left Behind Act, Title IV, Part B		Other	
	CFDA# 84.2				
	_	budget on contract	10	Financial Repor	rting Method:
		N2 1400001896 Cycle 10			Submission
					Submission of quarterly reimbursement
					package
4	Grant Authority (Source):		11		
	No Child Left Behind Act of 2001,	Title IV, Part B, Education Department			
	General Administrative Regulation	ns 34 CFR 76,77,80,82 and 85			
5	Award Amount: MUNIS 550AC	Amount \$75,000	_11		ubmission of an annual report to
		PROFICIENT OX PRE	PAR	Kentucky Depart	ment of Education is required
	(See MOA for Budget breakdown)	5 11 6 6	E	5 5	
6	Period of Award:	3 0 6 6	ll-m	5 5	
	August 22, 2014 - September 30,	1.7			
12	Consortia/Partnership Members	KENTUCKY DEPARTMENT	OFE	DUCATION	
13	<u> </u>		íon) an	u and a d fore fine a	un aver la constante of from dies a la constante d
13		: Grants (New, Continuation, Expans based upon availability of funds from			
		e prepared based upon the timeframe.	s allow	ea by the Kenti	icky Jinance & Aaministration
4.4	Cabinet.	T 1 (D)		D	05.0044
14		onna Tackett, Director		Date: Septembe	er 25, 2014
	D	ivision of Consolidated Plans & Audits			

1	Name and Address of Rec	ipient:	7	Fund Type:
	Agency Name Pulaski (County		☐ State
	Street Address 501 East	University Dr.		□ Federal
	City, State Zip Somerse	et, KY 42502		Other:
			8	Method of Payment:
2	KDE Contact Information:	101/6	N III	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	-	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	, ,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001883 Cycle 8		Electronic Submission
	Wie / Crambol	1 3112 1 10000 1000 Sydio 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paoriago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· · · · · · · · · · · · · · · · · · ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		



Award Notification

1	Name and Address of Recipient: Agency Name Pleasant Green Baptist Church Street Address P.O. Box 910240 City, State Zip Lexington, KY 40591	7	Fund Type: State Federal Other:
2	KDE Contact Information: Program Consultant Street Address Budget Contact Street Address Street Address City, KY Zip Street Address Frankfort, Kentucky 40601	KI CHI	Method of Payment: Federal Cash Request Expenditure Reimbursement Automatic Payment Lump Sum Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description Fund Source CFDA# MUNIS Project Number MOA Number PON2 1400001896 Cycle 10	IV, Part B	Reimbursement Frequency: Monthly Quarterly Other Financial Reporting Method: Electronic Submission Other Submission of quarterly reimbursement package
4	Grant Authority (Source): No Child Left Behind Act of 2001, Title IV, Part B, Education General Administrative Regulations 34 CFR 76,77,80,82 and		
6	Award Amount: MUNIS 550AC Amount \$75,000 (See MOA for Budget breakdown) Period of Award: August 22, 2014 - September 30, 2015		Evaluations: Submission of an annual report to Kentucky Department of Education is required
12	Consortia/Partnership Members: KENTUCKY DE	PARTMENT OF E	DUCATION
13	Special Instructions/Conditions: Grants (New, Continuing in the Request for Application, based upon availability and award notifications will be prepared based upon the Cabinet.	ation, Expansion) av y of funds from the U	varded for five years/projects of funding, as stated Inited States Department of Education. Contracts
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidated Pla		Date: September 25, 2014

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Pulaski (County		☐ State
	Street Address 501 Eas	t University Dr.		
	City, State Zip Somerse	et, KY 42502		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DVC	W III -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		·
	•		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:	7	Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001883 Cycle 8		Electronic Submission
	mer i i umbei	TOTAL TROOPERS		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		11	1111191
		2001, Title IV, Part B, Education Department		
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			CC
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe		-	
40	Compositio/Doutmondin Mo	KENTUCKY DEPARTMENT	OF L	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
ı				
	Cabinet.			
14	Cabinet. Authorized By (Name/Title	e): Donna Tackett, Director Division of Consolidated Plans & Audits		Date: September 25, 2014

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name RC Durr	YMCA		☐ State
	Street Address 1105 Elr	n Street		□ Federal
	City, State Zip Cincinna	iti, OH 45202		Other:
			8	Method of Payment:
2	KDE Contact Information:		W 100 -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	H//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, , , , , , , , , , , , , , , , , , ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001897 Cycle 8		Electronic Submission
	INO TIGHTEE	1 0142 1400001001 Gyold 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Save the	e Children		☐ State
	Street Address 126 Maii	n Street		□ Federal
	City, State Zip Berea, K	Y 40403		Other:
			8	Method of Payment:
2	KDE Contact Information:		W 100 -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	H//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, , , , , , , , , , , , , , , , , , ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001898 Cycle 9		Electronic Submission
	West (Marrise)	1 0142 1400001000 Oyolo 3		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me		, ,	
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			
14	Authorized By (Name/Title	· ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ipient:	7	Fund Type:
	Agency Name Taylor C			☐ State
	Street Address 207 Wes	t Main Street		□ Federal
	City, State Zip Taylorsv	ille, KY 40071		Other:
			8	Method of Payment:
2	KDE Contact Information:	.01/6	W	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072		Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 37		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001884 Cycles 8 & 9		Electronic Submission
	Wertramber	1 3112 1 10000 100 1 3yoloo 0 4 5		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonage
•		2001, Title IV, Part B, Education Department	11	
		ulations 34 CFR 76,77,80,82 and 85		
5		504E \$67,500; MUNIS 5504H \$75,000	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)			C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
40	0 11 15 1 11 11	KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe.	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			
14	Authorized By (Name/Title	· · · · · · · · · · · · · · · · · · ·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ripient:	7	Fund Type:
	Agency Name Todd Co	unty		☐ State
	Street Address 205 Airp	ort Rd.		□ Federal
	City, State Zip Elkton, k	Y 42220		Other:
	•			
			8	Method of Payment:
2	KDE Contact Information:		V M	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7.4	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001885 Cycle 10	10	Electronic Submission
	WOA Namber	1 3142 1400001003 Gydlc 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	•			
13				warded for five years/projects of funding, as stated
	in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts			
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ipient:	7	Fund Type:
	Agency Name Wayne (County		☐ State
	Street Address 1025 So	uth Main Street		
	City, State Zip Monticel	o, KY 42633		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	1111	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	4//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	-	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001886 Cycle 8		Electronic Submission
	INO TIGHTSCI	1 SINZ 140000 1000 Gydle 0		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):		1	paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5		504 \$75,000; MUNIS 5504C \$60,000	11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		6 6
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe	r 30, 2015		
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	•			
13				warded for five years/projects of funding, as stated
	in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts			
	and award notifications will be prepared based upon the timeframes allowed by the Kentucky Finance & Administration			
	Cabínet.			-
14	Authorized By (Name/Title	e): Donna Tackett, Director		Date: September 25, 2014
	_ ` `	Division of Consolidated Plans & Audits		•

1	Name and Address of Red	cipient:	7	Fund Type:
	Agency Name Whitley	County		☐ State
	Street Address 300 Maii	n Street		□ Federal
	City, State Zip Williams	burg, KY 40769		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	V M	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7	Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001887 Cycles 8 & 9		Electronic Submission
	West ramper	TOTAL PROGRAMMENT CHARACTER STATE OF THE STA		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paoriago
		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	c H c c		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
40		KENTUCKY DEPARTMENT	OF E	DUCATION
12	Consortia/Partnership Me			
13				warded for five years/projects of funding, as stated
				United States Department of Education. Contracts
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ripient:	7	Fund Type:
	Agency Name Wolfe Co	ounty		☐ State
	Street Address 85 Main	St.		□ Federal
	City, State Zip Camptor	n, KY 41301		Other:
			8	Method of Payment:
2	KDE Contact Information:		W 100 -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	H//	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,		9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001888 Cycle 10		Electronic Submission
	West (Name)	1 3142 1400001000 Gydic 10		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	C II C C		C C
6	Period of Award:	3 0 6 6		2 2
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	•			
13				warded for five years/projects of funding, as stated
	in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts			
		will be prepared based upon the timeframe	s allov	wed by the Kentucky Finance & Administration
	Cabinet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red		7	Fund Type:
	Agency Name Woodfor	d County		☐ State
	Street Address 330 Pisc	ah Pk.		□ Federal
	City, State Zip Versaille	s, KY 40383		Other:
			8	Method of Payment:
2	KDE Contact Information:	2016	W III -	Federal Cash Request
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358		Lump Sum
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, Kentucky 40601		
	- 3,	, ,	9	Reimbursement Frequency:
3	Description/Fund Source	of Award and Fiscal Year:		Monthly
	Description	21 st Century Community Learning Centers		Quarterly
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other
	CFDA#	84.287C		
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:
	MOA Number	PON2 1400001889 Cycle 9		Electronic Submission
	Wie / (rainbei	1 0142 1400001000 Cyolc 5		Other Submission of quarterly reimbursement
				package
4	Grant Authority (Source):			paonago
•		2001, Title IV, Part B, Education Department	11.	
		ulations 34 CFR 76,77,80,82 and 85		
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required
	(See MOA for Budget breakdown)	CILCC		C C
6	Period of Award:	3 0 6 6		3 3
	August 1, 2014 - Septembe			
		KENTUCKY DEPARTMENT	OF E	DUCATION
12	•			
13				warded for five years/projects of funding, as stated
	in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts			
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration
	Cabínet.			
14	Authorized By (Name/Title	·		Date: September 25, 2014
		Division of Consolidated Plans & Audits		

1	Name and Address of Red	ripient:	7	Fund Type:	
	Agency Name YMCA of	f Greater Cincinnati		☐ State	
	Street Address 1105 Elr	n Street		□ Federal	
	City, State Zip Cincinna	ti, OH 45202		Other:	
			8	Method of Payment:	
2	KDE Contact Information:		V M	Federal Cash Request	
	Program Consultant	Brigette Stacy 502-564-1473 ext. 4072	HII	Expenditure Reimbursement	
	Street Address	500 Mero St., 19th Fl. CPT		Automatic Payment	
	Budget Contact	Martha Johnson 502-564-1979 ext. 4358	7.4	Lump Sum	
	Street Address	500 Mero St., 16th Fl. CPT		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, Kentucky 40601			
	- 37		9	Reimbursement Frequency:	
3	Description/Fund Source	of Award and Fiscal Year:		Monthly	
	Description	21 st Century Community Learning Centers		Quarterly	
	Fund Source	No Child Left Behind Act, Title IV, Part B		Other	
	CFDA#	84.287C			
	MUNIS Project Number	See budget on contract	10	Financial Reporting Method:	
	MOA Number	PON2 1400001899 Cycle 10		Electronic Submission	
	Wer trained	TOTAL TROOPERSON SYSTEM	1	Other Submission of quarterly reimbursement	
				package	
4	Grant Authority (Source):			passings	
-		2001, Title IV, Part B, Education Department	1		
		ulations 34 CFR 76,77,80,82 and 85			
5	Award Amount: MUNIS 5		11	Evaluations: Submission of an annual report to	
		PROFICIENT & PRE	PAF	Kentucky Department of Education is required	
	(See MOA for Budget breakdown)			C C	
6	Period of Award:	3 0 6 6		3 3	
	August 1, 2014 - Septembe		_		
40	0 11 15 1 11 15	KENTUCKY DEPARTMENT	OF E	DUCATION	
12	Consortia/Partnership Me		· ·		
13				warded for five years/projects of funding, as stated	
	in the Request for Application, based upon availability of funds from the United States Department of Education. Contracts				
		will be prepared based upon the timeframe	s allov	ved by the Kentucky Finance & Administration	
	Cabinet.				
	Authorized By (Name/Title			Date: September 25, 2014	
		Division of Consolidated Plans & Audits			